



PAWNBROKER LICENSE INFORMATION

OFFICE OF THE CITY CLERK LICENSE DIVISION
200 E. WELLS ST. ROOM 105, MILWAUKEE, WI 53202
(414) 286-2238 EMAIL: LICENSE@MILWAUKEE.GOV

DEFINITION:

Pawnbroker shall mean an individual, partnership, limited liability company or corporation engaged in the business of lending money on personal property or goods, which are pledged as security for the loan on the condition that if the loan is not repaid within a specified period of time the goods used as security may be sold to compensate for nonpayment.

LICENSE PERIOD:

January 1 thru December 31, Annually

APPLICATION:

Submit application to City Clerk License Division, City Hall, 200 E. Wells Street, Room 105, Milwaukee, WI 53202, telephone (414) 286-2238.

FEE:

The \$295.00 license fee **must be submitted with application**. Checks should be made payable to the City of Milwaukee.

SIGNATURES:

Signatures of the individual, all partners, the agent, president, and secretary of the corporation, and the agent and all members of a limited liability company are required.

RESIDENCY:

The individual, both partners, agent of the corporation or limited liability company must be a resident of the state of Wisconsin for one year prior to the date of application. Proof of residency must be submitted to the Milwaukee Police Department License Investigation Unit upon application, please call (414) 935-7430 to comply with this requirement.

REQUIREMENTS:

The attached bond form in the amount of \$500.00 must be completed by two sureties and submitted with your application.

A permit must be obtained from the City of Milwaukee, Development Center, Permit Desk, 809 N. Broadway, 1st floor, (414) 286-8211, <http://www.mkedcd.org/build/pdfs/occcert.pdf>.

If a variance is required, contact the Board of Zoning Appeals at (414) 286-2501, <http://www.mkedcd.org/boza/>.

REPORT CHANGES:

Whenever any fact set forth in the application changes, the licensee shall file a written notice of the change with the License Division within 10 days.

ORDINANCES GOVERNING PAWNBROKERS ARE LOCATED IN SECTION 92-1
OF THE MILWAUKEE CODE AND MAY BE VIEWED ONLINE <http://www.ci.mil.wi.us/ctygov/council/isysintro.htm>
or purchased from the Legislative Reference Bureau in City Hall, Room B-11.



**City
of
Milwaukee**

PAWNBROKER LICENSE APPLICATION

OFFICE OF THE CITY CLERK LICENSE DIVISION
200 E. WELLS ST. ROOM 105, MILWAUKEE, WI 53202
(414) 286-2238 E-MAIL ADDRESS: LICENSE@MILWAUKEE.GOV

Check one: ☐ Individual or ☐ Partnership (Fill out Section A, B, & D)
☐ Corporation or LLC (Fill out Section B, C, & D)

A	INDIVIDUAL OR PARTNERSHIP:		Full Name (Last, First & Middle Initial)	
	Full Name (Last, First & Middle Initial)		Full Name (Last, First & Middle Initial)	
	Home Street Address:		Home Street Address:	
	Home City State, Zip Code:		Home City State, Zip Code:	
	Place of Birth:		Place of Birth:	
	Home Phone Number: () -		Home Phone Number: () -	
B	Date of Birth:		Date of Birth:	
	Business Name:		Business Phone Number: () -	
	Business Address (include City, State, Zip Code):			
	Mailing Address (if different from above address):			
	Building Owner:			
C	Building Owner's Address:			
	Full Name of corporation or limited liability company:			
	State of Incorporation:			
	<i>Agent:</i>			
	Full Name (Last, First & Middle Initial):		Home Address (include City, State & Zip Code):	
	Home Phone Number: () -		Date of Birth:	Place of Birth:
	<i>President/Member</i>		<i>Vice President/Member</i>	
	Full Name (Last, First & Middle Initial):		Full Name (Last, First & Middle Initial):	
	Home Street Address:		Home Street Address:	
	Home City, State, Zip Code:		Home City, State, Zip Code:	
	Place of Birth:		Place of Birth:	
	Home Phone Number: () -		Home Phone Number: () -	
	Date of Birth:		Date of Birth:	

OVER

11/12/03

C Cont.	<i>Secretary/Member</i>	<i>Treasurer/Member</i>
	Full Name (Last, First & Middle Initial):	Full Name (Last, First & Middle Initial):
	Home Street Address:	Home Street Address:
	Home City, State, Zip Code:	Home City, State, Zip Code:
	Place of Birth:	Place of Birth:
	Home Phone Number: () -	Home Phone Number: () -
	Date of Birth:	Date of Birth:
D	<p>Has anyone named on this application been convicted of violating any federal or state laws or local ordinances? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list name of person(s), date, charge, and penalty:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
	<p>The undersigned agrees to inform the City Clerk within ten days of any substantial changes in the information supplied in this application. The undersigned shall not willfully refuse to provide the services offered under this license, or refuse to employ, or discharge any person otherwise qualified because of race, color, creed, sex, national origin or ancestry; and not seek such information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion on the basis of such information.</p> <p>I have knowledge of the City Ordinances currently regulating the license applied for herein and say that I am the person named above and that all statements made in the foregoing application are true and correct.</p> <p style="text-align: center;">_____ Individual/Agent of Corp or LLC/Partner</p> <p style="text-align: center;">_____ President of Corp/Member of LLC/Partner</p> <p style="text-align: center;">_____ Secretary of Corp/Add'l Members/Partner</p>	

Office Use Only:

Initials: _____ Filed: _____ AD: _____ License #: _____ Granted: _____

BOND NO. _____

BOND FOR LICENSED PAWNBROKERS

ccl-149b (11/04)

Know all men by these presents, That we, (principal) _____

as principal and (sureties)(1) _____ and(2) _____,as sureties, are held and firmly bound unto the City of Milwaukee in the sum of five (\$500) hundred dollars, to be paid to the said City of Milwaukee, for which payment well and truly to be made, we bind ourselves and our respective heirs, executors and administrators, and each and everyone of them, jointly and severally by these presents.

Signed and Sealed with our seals, and dated this _____ day of _____, 20____

The condition of this obligation is such that, Whereas, the above bound Principal has applied to the proper authorities of the City of Milwaukee, for a license to act as a Pawnbroker at (location) _____ in the (Ald. district) # _____, in said City of Milwaukee, until the first day of January, 2006. (unless sooner revoked) and whereas, such license has been granted to him.

Now Therefore, if the said(name of principal) _____ during the continuance of his license, shall duly comply with the laws of the state of Wisconsin affecting said business, and shall comply with all the requirements of the ordinances of the City of Milwaukee affecting said business, which ordinances are now in effect or may hereafter become effective, then this obligation shall be null and void, otherwise to be in full force and effect.

SURETY 1

In presence of:

PRINT NAME OF PRINCIPAL (Seal)

(Witness) By _____
SIGNATURE OF PRINCIPAL

(Witness) _____ (Seal)
Corp. Operating with Seal, Please Affix

ATTORNEY-IN-FACT/AGENT

AFFIDAVIT

STATE OF WISCONSIN)
)ss
_____ County)

_____,being first duly sworn, on oath deposes and says

that he is _____ of the _____,
(Attorney in fact or Agent) (Bonding Company)

surety on the attached bond executed for _____. (Name of Insured)

Affiant further deposes and says that no officer, official or employe of the City of Milwaukee has any interest, directly or indirectly, or is receiving any premium, commission, fee, or other thing of value on account of the sale or furnishing of said bond.

Subscribed and sworn to before me this

_____ day of _____, 20____

Notary Public, State of _____

My Commission expires _____

Attorney-in-fact/Agent

Approved as to form and execution.

Assistant City Attorney

_____, 20____

(OVER - SECOND SURETY MUST COMPLETE REVERSE SIDE)

SURETY 2

In presence of:

(Witness)

(Witness)

PRINT NAME OF PRINCIPAL (Seal)

By _____
SIGNATURE OF PRINCIPAL

Corp. Operating with Seal, Please Affix (Seal)

ATTORNEY-IN-FACT/AGENT

AFFIDAVIT

STATE OF WISCONSIN)
_____)ss
_____ County)

_____, being first duly sworn, on oath deposes and says
that he is _____ of the _____,
(Attorney in fact or Agent) (Bonding Company)

surety on the attached bond executed for _____. (Name of Insured)
Affiant further deposes and says that no officer, official or employe of the City of Milwaukee has any interest, directly or indirectly, or is
receiving any premium, commission, fee, or other thing of value on account of the sale or furnishing of said bond.

Subscribed and sworn to before me this
_____ day of _____, 20____

Notary Public, State of _____

My Commission expires _____

Attorney-in-fact/Agent

Approved as to form and execution.

Assistant City Attorney

_____, 20____